PATENT



United States Patent Application

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor I hereby declare that: my residence, post office address and citizenship are as stated below

next to my name; that			
I verily believe I am plural inventors are named bel entitled: INFORMATION REMOTE MG	ow) of the subject matter whi	nventor (if only one name is lis ch is claimed and for which a	ted below) or a joint inventor (i patent is sought on the inventio
of a PCT-filed application) descreviewed and for which I solicit	cribed and claimed in internat: t a United States patent.	ional no filed and as am	on (if applicable) (in the cas
I hereby state that I have revi amended by any amendment referre		its of the above-identified speci	fication, including the claims, a
I acknowledge the duty to discl	ose information which is mater:	ial to the examination of this ap	plication in accordance with Titl
37, Code of Federal Regulations	1		
of inventor's certificate list	ted below and have also idea	ted States Code, §119/365 of any ntified below any foreign appl on on the basis of which priority	foreign application(s) for paten ication for patent or inventor' is claimed:
a. X no such applications have be			
F	FOREIGN APPLICATION(S), IF ANY,	CLAIMING PRIORITY UNDER 35 USC 5	119
COUNTRY	APPLICATION NUMBER	DATE OF FILING	DATE OF ISSUE
ALL	FOREIGN APPLICATIONS, IF ANY,	FILED BEFORE THE PRIORITY APPLICA	ATION(S)
COUNTRY	APPLICATION NUMBER	DATE OF FILING	DATE OF ISSUE

hereby claim the benefit under Title 35, United States Code, §120/365 of any United States and PCT international application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §156(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

^{§ 1.56} Duty of disclosure; fraud, striking or rejection of applications.

A duty of candor and good faith toward the Patent and Trademark Office rests on the inventor, on each attorney or agent who prepares or prosecutes the application and on every other individual who is substantively involved in the preparation or prosecution of the application and who is associated with the inventor, with the assignee or with anyone to whom there is an obligation to assign the application. All such individuals have a duty to disclose to the Office information they are aware of which is material to the examination of the application. Such information is material where there is substantial likelihood that a reasonable examiner would consider it important in deciding whether to allow the application to issue as a patent. The duty is commensurate with the degree of involvement in the preparation or prosecution of the application.



U.S. APPLICATION THE TOTAL	DATE OF FILING	STATUS (patented, pending, abandoned)
60/180,285	04 FEBRUARY 2000	PENDING

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith:

Harold R. Patton	Reg. No. 22,157	Girma Wolde-Michael	Req. No.	30,724
Thomas G. Berry	Reg. No. 31,736	Kenneth J. Collier	Reg. No.	34,982
Daniel W. Latham	Reg. No. 30,401	Curtis D. Kinghorn	Reg. No.	33,926
Thomas F. Woods	Reg. No. 36,726	Beth L. McMahon	Reg. No.	41,987
Eric R. Waldkoetter	Reg. No. 36,713	Stephen W. Bauer	Reg. No.	32,192

Please direct all correspondence in this case to: Girma Wolde-Michael

	Full Name of Inventor	FIRST NAME	MIDDLE INITIAL A.	LAST NAME CHRISTOPHERSON
	Residence & Citizenship	CITY SHOREVIEW	STATE OR FOREIGN COUNTRY MINNESOTA	COUNTRY of CITIZENSHIP US
	Post Office Address	POST OFFICE ADDRESS 4100 REILAND LANE	CITY SHOREVIEW	STATE/ZIP/COUNTRY MINNESOTA/55125/US
IGNA:	TURE OF INVENTO	1201 Alle		DATE: 5-24-01
11	Full Name of	FIRST NAME VIRGINIA	MIDDLE INITIAL	LAST NAME DE LA RIVA
	Residence & Citizenship	CITY MINNEAPOLIS	STATE OR FOREIGN COUNTRY MINNESOTA	COUNTRY of CITIZENSHIP US
	Post Office Address	POST OFFICE ADDRESS 4139 GARFIELD AVENUE SOUTH	CITY MINNEAPOLIS	STATE/ZIP/COUNTRY MINNESOTA/55402/US
(GNA	TURE OF INVENTOR	inadelation.	>	DATE: 5.24.01
	Full Name of Inventor	FIRST NAME GARY	MIDDLE INITIAL	LAST NAME TAPP
	Residence & Citizenship	CITY PLYMOUTH	STATE OR FOREIGN COUNTRY MINNESOTA	COUNTRY of CITIZENSHIP US
	Post Office Address	POST OFFICE ADDRESS 4215 ORCHID LANE	CITY PLYMOUTH	STATE/ZIP/COUNTRY MINNESOTA/55446/US
SIGNATURE OF INVENTOR 203: Hay A. Topo				

 $[\]underline{\hspace{0.1cm}}$ x Additional pages of this declaration follow.

lowing attorney(s) and/or agent(s) to prosecute this application and to transact all business in the connected herewith:

I hereby applied the following Patent and Trackerk Office Con	attorney(s) and/or nected herewith:	agent(s) to prosecute this a	application and to tra
Harold R. Patton	Reg. No. 22,157	Girma Wolde-Michael	Reg. No. 30,724
Thomas G. Berry	Reg. No. 31,736	Kenneth J. Collier	Reg. No. 34,982
Daniel W. Latham	Reg. No. 30,401	Curtis D. Kinghorn	Reg. No. 33,926
Thomas F. Woods	Reg. No. 36,726	Beth L. McMahon	Reg. No. 41,987
Eric R. Waldkoetter	Reg. No. 36,713	Stephen W. Bauer	Reg. No. 32,192

Please direct all correspondence in this case to:

Girma Wolde-Michael Medtronic, Inc. 7000 Central Avenue N.E, Minneapolis, Minnesota 55432 Telephone No. (612) 574-3156

	Full Name of	FIRST NAME	MIDDLE INITIAL	LAST NAME
2	Inventor	ANDRZEJ	м	MALEWICZ
)	Residence &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY of CITIZENSHIP
ı	Citizenship	MINNEAPOLIS	MINNESOTA	POLAND
	Post Office	POST OFFICE ADDRESS	CITY	STATE/ZIP/COUNTRY
	Address	4139 GARFIELD AVENUE	MINNEAPOLIS	MINNESOTA/55409/US
GIGNA.	TURE OF INVENTO	Andres M.	Malearie	DATE: 6/18/01
	Full Name of	FIRST NAME	MIDDLE INITIAL	LAST NAME
	Inventor	BRIAN	Р.	SCHMALZ
	Residence &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY of CITIZENSHIP
,	Citizenship	MINNEAPOLIS	MINNESOTA	US
	Post Office	POST OFFICE ADDRESS	CITY	STATE/ZIP/COUNTRY
	Address	3630 SHERIDAN AVENUE NORTH	MINNEAPOLIS	MINNESOTA/55412/US
IGNA'	TURE OF INVENTO	R 205:		DATE:
	Full Name of	FIRST NAME	MIDDLE INITIAL	LAST NAME
	Inventor	TROY	D	KOPISCHKE
	Residence &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY of CITIZENSHIP
	Citizenship	HAMEL .	MINNESOTA	us
	Post Office	POST OFFICE ADDRESS	CITY	STATE/ZIP/COUNTRY
	Address	20400 LARKIN ROAD	HAMEL	MINNESOTA/55340/US
SIGNATURE OF INVENTOR 206:				DATE:
				ı

 $[\]underline{}$ This is the final page of this declaration.



I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademan Office confected herewith:

Harold R. Patton	D 11- 00 155	Girma Wolde-Michael	Req. No. 30,724
Harold R. Patton	Reg. No. 22,157		
Thomas G. Berry	Reg. No. 31,736	Kenneth J. Collier	Reg. No. 34,982
Daniel W. Latham	Reg. No. 30,401	Curtis D. Kinghorn	Reg. No. 33,926
Thomas F. Woods	Reg. No. 36,726	Beth L. McMahon	Reg. No. 41,987
Eric R. Waldkoetter	Reg. No. 36,713	Stephen W. Bauer	Reg. No. 32,192

Please direct all correspondence in this case to:

Girma Wolde-Michael Medtronic, Inc. 7000 Central Avenue N.E, Minneapolis, Minnesota 55432 Telephone No. (612) 574-3156

	Full Name of Inventor	FIRST NAME	MIDDLE INITIAL	LAST NAME	
2		ANDRZEJ	м	MALEWICZ	
0	Residence &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY of CITIZENSHIP	
4	Citizenship	MINNEAPOLIS	MINNESOTA	POLAND	
	Post Office	POST OFFICE ADDRESS	CITY	STATE/ZIP/COUNTRY	
	Address	4139 GARFIELD AVENUE	MINNEAPOLIS	MINNESOTA/55409/US	
SIGNA'	TURE OF INVENTO	R 204:		DATE:	
	Full Name of	FIRST NAME	MIDDLE INITIAL	LAST NAME	
2	Inventor	BRIAN	P	SCHMALZ	
0	Residence &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY of CITIZENSHIP	
5	Citizenship	MINNEAPOLIS	MINNESOTA	us	
	Post Office	POST OFFICE ADDRESS	CITY	STATE/ZIP/COUNTRY	
Address		3630 SHERIDAN AVENUE NORTH	MINNEAPOLIS	MINNESOTA/55412/US	
SIGNA	SIGNATURE OF INVENTOR 205: BC P. S.			DATE: 6/5/01	
	Full Name of	FIRST NAME	MIDDLE INITIAL	LAST NAME	
2	Inventor	TROY	D	KOPISCHKE	
0	Residence &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY of CITIZENSHIP	
6	Citizenship	HAMEL	MINNESOTA	us	
	Post Office	POST OFFICE ADDRESS	CITY	STATE/ZIP/COUNTRY	
	Address	20400 LARKIN ROAD	HAMEL	MINNESOTA/55340/US	
SIGNA'	TURE OF INVENTO		DATE:		

 $[\]underline{}$ This is the final page of this declaration.

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Transact Office connected herewith:

Harold R. A BAOL Thomas G. Berry Daniel W. Latham Thomas F. Woods	Reg. No. 22,157 Reg. No. 31,736 Reg. No. 30,401 Reg. No. 36,726	Girma Wolde-Michael Kenneth J. Collier Curtis D. Kinghorn Beth L. McMahon	Reg. No. 30,724 Reg. No. 34,982 Reg. No. 33,926 Reg. No. 41,987
Thomas F. Woods	Reg. No. 36,726	Beth L. McMahon	
Eric R. Waldkoetter	Reg. No. 36,713	Stephen W. Bauer	Reg. No. 32,192

Please direct all correspondence in this case to:

Girma Wolde-Michael Medtronic, Inc. 7000 Central Avenue N.E, Minneapolis, Minnesota 55432 Telephone No. (612) 574-3156

2	Full Name of Inventor	FIRST NAME ANDRZEJ	MIDDLE INITIAL M.	LAST NAME MALEWICZ
0	Residence & Citizenship	CITY MINNEAPOLIS	STATE OR FOREIGN COUNTRY	COUNTRY of CITIZENSHIP POLAND
	Post Office Address	POST OFFICE ADDRESS 4139 GARFIELD AVENUE	CITY MINNEAPOLIS	STATE/ZIP/COUNTRY MINNESOTA/55409/US
SIGNAT	TURE OF INVENTO			DATE:
2	Full Name of Inventor	FIRST NAME BRIAN	MIDDLE INITIAL P.	LAST NAME SCHMALZ
0 5	Residence & Citizenship	CITY MINNEAPOLIS	STATE OR FOREIGN COUNTRY MINNESOTA	COUNTRY OF CITIZENSHIP US
	Post Office Address	POST OFFICE ADDRESS 3630 SHERIDAN AVENUE NORTH	CITY MINNEAPOLIS	STATE/ZIP/COUNTRY MINNESOTA/55412/US
SIGNAT	TURE OF INVENTO	R 205:		DATE:
2	Full Name of Inventor	FIRST NAME TROY	MIDDLE INITIAL D.	LAST NAME KOPISCHKE
0 6	Residence & Citizenship	CITY	STATE OR FOREIGN COUNTRY MINNESOTA	COUNTRY OF CITIZENSHIP US
	Post Office Address	POST OFFICE ADDRESS 20400 LARKIN ROAD	CITY	STATE/ZIP/COUNTRY MINNESOTA/55340/US
SIGNAT	DATE: 6 /11/01			

_x This is the final page of this declaration.